

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

## FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

1136585	
05063202	

Prefix Serial

DATE RECEIVED

UNIFORM LIMITED OFFERING EXEM	PTION
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Preferred Series C	
Filing Under (Check box(es) that apply):  Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE
A. BASIC DENDIFICATION DATA	**
1. Enter the information requested about the issuer	e e e
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
Digital Map Products	
Address of Executive Offices (Number and Street, City, State, Zip Code) 575 Anton Drive, Suite 750, Costa Mesa, CA 92626	Telephone Number (Including Area Code) (714) 432-7637
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) 575 Anton Drive, Suite 750, Costa Mesa, CA 92626	Telephone Number (Including Area Code)
Brief Description of Business	R
Aircraft engine technology	PROCESSED
business trust   limited partnership, to be formed	olense specify):  AUG 1 2 2005
Actual or Estimated Date of Incorporation or Organization: 0 7 0 4 Actual Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	THOMSON FINANCIAL
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D o 77d(6).	r Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering, and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given by which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20:	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be

Filing Fee: There is no federal filing fee.

not be filed with the SEC.

#### States

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need

### ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filling of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		ABASICIDE	NTIFICATION DATA	7.7	
Each beneficial own	e issuer, if the issu er having the power	er has been organized wit to vote or dispose, or dire	ct the vote or disposition c		a class of equity securities of the issuer
		Corporate issuers and of partnership issuers.	corporate general and m	nanaging partners	of partnership issuers; and
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)		······································	<del></del>	
69 Santa Felicia Drive, Goleta Business or Residence Addri		treet, City, State, Zip Coo	ie)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Mark Kennedy Full Name (Last name first, i	f individual)				
69 Santa Felicia Drive, Goleta	, CA 93117				
Business or Residence Addr	ess (Number and S	treet, City, State, Zip Co.	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Manfred Hanno Janssen Full Name (Last name first, i	f individual)				
69 Santa Felicia Drive, Goleta			•		
Business or Residence Addr		treet, City, State, Zip Co.	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Peter Hofbauer Full Name (Last name first, i	f individual)				
69 Santa Felicia Drive, Goleta					
Business or Residence Addr	ess (Number and S	treet, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Wilhelm Scharrenberg Full Name (Last name first,	if individual)				
69 Santa Felicia Drive, Golett	•				
Business or Residence Addr		Street, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
William Harris Full Name (Last name first,	if individual)				
69 Santa Felicia Drive, Golet	a, CA 93117				
Business or Residence Add	ress (Number and !	Street, City, State, Zip Co	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Add	ress (Number and	Street, City, State, Zip Co	nde)		
		·			
	(Use bla	nk sheet, or copy and use	additional copies of this s	heet, as necessary	)

B. INFORMATION ABOUT OFFERING		
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes	No ⊠
Answer also in Appendix, Column 2, if filing under ULOE.	ш	Z3
2. What is the minimum investment that will be accepted from any individual?	\$ <u>N/A</u>	
3. Does the offering permit joint ownership of a single unit?	Yes ⊠	No
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the off if a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of a broker or dealer, you may set forth the information for that broker or dealer only.	fering. a state	
Full Name (Last name first, if individual)		
None Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)		States
AL AK AZ AR CA CO CT DE DC FL G	IA HI	Œ
	IN MS	МО
MT NE NV NH NJ NM NY NC ND OH C	OK OR	PA
RI SC SD TN TX UT VT VA WA WV T	VI WY	PR
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All-States" or check individual States)		l States
AL AK AZ AR CA CO CT DE DC FL	GA HI	ID
IL IN IA KS KY LA ME MD MA MI	MS MS	MO
	OK OR	PA
RI SC SD TN TX UT VT VA WA WV	WI WY	PR
Full Name (Last name first, if individual)	*****	
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)		II States
· · · · · · · · · · · · · · · · · · ·	GA HI	ID
	MN MS	МО
MT NE NV NH NJ NM NY NC ND OH	OK OR	PA
RI SC SD TN TX UT VT VA WA WV	WI WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt ......\$ 3,527,317.02 Common Preferred Convertible Securities (including warrants) \$ Other (Specify 3,527,317.02 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases Accredited Investors 3,527,317.02 Non-accredited Investors ..... 0 Total (for filings under Rule 504 only) 3,527,317.02 Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Dollar Amount Type of Offering Security Sold Rule 505 ..... N/A S 0.00 Regulation A ..... N/A \$ 0.00 Rule 504 N/A S 0.00 N/A S 0.00 Total ..... a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees ..... Printing and Engraving Costs Legal Fees ..... X 55,000,00 Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) Other Expenses (identify) 

55,000.00

Total .....

ţ į į	GROFFERING PRICE, NUMBER OF INVESTORS, EXPI	ENSES AND USE OF PI	ROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to and total expenses furnished in response to Part C—Question 4.a. This difference proceeds to the issuer."	is the "adjusted gross		\$_4,974,263.00
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or preach of the purposes shown. If the amount for any purpose is not known, fur check the box to the left of the estimate. The total of the payments listed must eq proceeds to the issuer set forth in response to Part C—Question 4.b above.	nish an estimate and		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	······	\$0.00	<b>S</b>
	Purchase of real estate		]\$	s
	Purchase, rental or leasing and installation of machinery and equipment		]s	— — — — — — — — — — — — — — — — — — —
	Construction or leasing of plant buildings and facilities	······································	- <u></u> - ]s	□ <b>-</b>
	Acquisition of other businesses (including the value of securities involved in offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		]\$	
	Repayment of indebtedness		]\$	
	Working capital		]\$	 □s
	Other (specify):		\$	 
			]\$	s
	Column Totals		S 0.00	
	Total Payments Listed (column totals added)	14**14*********************************	□ <b>s</b>	_0.00
影	D, FEDERAL SIGNATU	RE SEE		
sig	te issuer has duly caused this notice to be signed by the undersigned duly authorize gnature constitutes an undertaking by the issuer to furnish to the U.S. Securities a le Information furnished by the issuer to any non-accredited investor pursuant to	and Exchange Commis	sion, upon writte	le 505, the following n request of its staff,
lss	suer (Print or Type) Signature		Date	
Di	gital Map Products		<u>ulv</u> 2005	
Na	ame of Signer (Print or Type)  Title of Signer (Print or	Type)	461	
Ja	mes S. Skurzynski President			

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E: STATE SIGNATURE	* 2	
1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Dignature	
Digital Map Products		1 1, 2005
Name (Print or Type)	Title (Print or Type)	
James Skurzynski	President	

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APPI	NDIX				
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	4  Type of investor and amount purchased in State (Part C-Item 2)			waiver p	fication te ULOE attach ation of	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL			,					-	
AK									
AZ		×	Series C Preferred	1 '	\$56,327.58				×
AR									
CA		X	Series C Preferred	18	\$3,400,239.2 0				×
со									
СТ									
DE									
DC			•						
FL									
GA									
ні									
ID									
1L									
IN									
1A									
KS									
KY									
LA									
ME									
MD									
MA									
MI									
MN									
MS									

				APPE	NDIX 🛴 🍃				
1	Intend to non-a investor	to self ecredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	4  Type of investor and amount purchased in State  (Part C-Item 2)			under St (if yes explan waiver	lification ate ULOE , attach ation of granted) -item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
мо									
мт									
NE									
NV									
NH									
NJ	-								
NM									
NY									
NC									
ND									
он									
ОК									
OR									
PA									
RI									
SC									
SD									
TN									
TX									
UT									
VT									
VA									
WA		X	Series C Preferred	1	\$70,750.24				×
wv	<del> </del>								
WI	1								

1	Intend to non-a investor:	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	and aggregate offering price offered in state		4  Type of investor and amount purchased in State (Part C-Item 2)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									